

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	Smc	71002	8/5/99
O.I.P.E. CLASSIFIER			8-11-99
FORMALITY REVIEW	WMM	48231	8/11/99

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Original	Date
1	✓	5/16/01
2	✓	5/16/01
3	✓	5/16/01
4	✓	5/16/01
5	✓	5/16/01
6	✓	5/16/01
7	✓	5/16/01
8	✓	5/16/01
9	✓	5/16/01
10	✓	5/16/01
11	✓	5/16/01
12	✓	5/16/01
13	✓	5/16/01
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45	✓	5/16/01
46	✓	5/16/01
47	✓	5/16/01
48	✓	5/16/01
49	✓	5/16/01
50	✓	5/16/01

Claim	Original	Date
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Claim	Original	Date
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If more than 150 claims or 10 actions  
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